

United States Bankruptcy Court
Eastern District of Michigan

In re **David L. Pichan,**
Jo Ann Pichan

Debtors

Case No. **12-66246**

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	23,000.00		
B - Personal Property	Yes	4	11,879.00		
C - Property Claimed as Exempt	Yes	3			
D - Creditors Holding Secured Claims	Yes	1		299,650.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		9,900.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		64,280.53	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			4,716.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			5,131.00
Total Number of Sheets of ALL Schedules		19			
Total Assets			34,879.00		
Total Liabilities				373,830.53	

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Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	9,900.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	9,900.00

State the following:

Average Income (from Schedule I, Line 16)	4,716.00
Average Expenses (from Schedule J, Line 18)	5,131.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,223.67

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		276,650.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	9,900.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		64,280.53
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		340,930.53

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Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. Cramer, Minock & Sweeney P.L.C. 339 E. Liberty St., #200 Ann Arbor, MI 48104		2009 Notice only - Creditor has forgiven debt.				0.00
Account No. James Walewski 327 Mulholland Avenue Ann Arbor, MI 48103		2007 Personal loan				15,000.00
Account No. Jan Clay Bunton Road Willis, MI 48191		2002 Notice Only Claim is barred by statute of limitations and is not otherwise recoverable.			X	0.00
Account No. Jeff Reitz 12275 S. Huron River Drive Romulus, MI 48174		2003 Notice Only Claim is barred by statute of limitations are is not otherwise recoverable.			X	0.00
Subtotal (Total of this page)						15,000.00

3 continuation sheets attached

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Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 1838 LJ Ross and Associates PO Box 1838 Ann Arbor, MI 48106	H	2008 Medical Bills				22,683.00
Account No. McKenna 6417 Center Drive Sterling Heights, MI 48312	J	2009 Heating & Cooling Services				863.43
Account No. Merchants & Medical 6324 Taylor Drive Flint, MI 48507	W	2009 Medical Bills				330.00
Account No. Mike Mason 1416 Arbor View Blvd. Ann Arbor, MI 48103	H	2004 Notice only Claim is barred by statute of limitations and is not otherwise recoverable			X	0.00
Account No. Steve Mruzek 3887 W. Dunbar Road Monroe, MI 48161	H	2010 Personal loan				4,100.00
Sheet no. 1 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 27,976.43

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. University of MI Hospitals & Health Cent Department 77914 PO Box 77000 Detroit, MI 48277	W	2009 Medical Bills				2,745.58
Account No. United Collection Bureau, Inc. 5620 Southwyck Blvd., Ste. 206 Toledo, OH 43614		Representing: University of MI Hospitals & Health Cent				Notice Only
Account No. Universal Credit Svcs. P.O. Box 158 Hartland, MI 48353		Representing: University of MI Hospitals & Health Cent				Notice Only
Account No. University of MI Hospitals & Health Cent Department 77914 PO Box 77000 Detroit, MI 48277	H	2008 Medical Bills				1,637.78
Account No. University of Michigan P O Box 2378 Ann Arbor, MI 48106	W	2009 Medical Bills				327.00
Sheet no. 2 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims <div style="text-align: right;"> Subtotal (Total of this page) </div>						4,710.36

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							Notice Only
United Collection Bureau, Inc. 5620 Southwyck Blvd., Ste. 206 Toledo, OH 43614			Representing: University of Michigan				
Account No.							16,593.74
University of Michigan P O Box 2378 Ann Arbor, MI 48106		H	2008-2011 Medical Bills				
Account No.							0.00
Young,Basile & Hanlon 3001 W. Big Beaver Rd., #624 Troy, MI 48084		H	2002 Notice Only Claim if barred by statute of limitations and is not otherwise recoverable.			X	
Account No.							
Account No.							

Sheet no. **3** of **3** sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page)**16,593.74**Total
(Report on Summary of Schedules)**64,280.53**